

PRIORITY MAIL EXPRESS®

**FLAT RATE
ENVELOPE**
ONE RATE ■ ANY WEIGHT

To schedule free Package Pickup,
scan the QR code.



USPS.COM/PICKUP



PS10001000006

EP13F July 2022
OD: 12 1/2 x 9 1/2



**UNITED STATES
POSTAL SERVICE®**

**PRIORITY
MAIL
EXPRESS®**



EI 955 573 935 US

CUSTOMER USE ONLY

FROM: (PLEASE PRINT)

PHONE ()

Postmaster
Big Lake, Alaska
in care of: Box 520994

DELIVERY OPTIONS (Customer Use Only)

☒ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

Delivery Options

- ☐ No Saturday Delivery (delivered next business day)
☐ Sunday/Holiday Delivery Required (additional fee, where available*)
*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT)

PHONE ()

Office of the Clerk
UNITED STATES DISTRICT COURT
120 North Henry Street, Rm 300
Madison, Wisconsin 53703

ZIP + 4® (U.S. ADDRESSES ONLY)

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
■ \$100.00 insurance included.



PEEL FROM THIS CORNER

PAYMENT BY ACCOUNT (if applicable)

Federal Agency Acct. No. or Postal Service™ Acct. No.

ORIGIN (POSTAL SERVICE USE ONLY)

<input type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code 99654	Scheduled Delivery Date (MM/DD/YY) 6/10	Postage \$31.40	
Date Accepted (MM/DD/YY) 3/13/25	Scheduled Delivery Time <input type="checkbox"/> 6:00 PM	Insurance Fee \$	COD Fee \$
Time Accepted 4:00 PM	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Return Receipt Fee \$	Live Animal Transportation Fee \$
Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$	Total Postage & Fees 31.40	
Weight lbs. 2.90 ozs.	<input type="checkbox"/> Flat Rate Acceptance Employee Initials CEB		
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	

LABEL 11-B, NOVEMBER 2023

PSN 7690-02-000-9996



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